Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

l	ERO must	obtain and	retain	com
	Go to www.i	rs.gov/Forn	n8879 f	or th

pleted Form 8879. ne latest information.

Submission Identification Number (SID)

Тахрауе	r's name	Social security n	umber
PRIY	A MADHURI MEKATHOTI	686-17-9	509
Spouse'	s name	Spouse's social s	security number
Part	Tax Return Information – Tax Year Ending December 31, 2023 (Enter	r year you are	authorizing.)
Enter v	whole dollars only on lines 1 through 5.		
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		
1	Adjusted gross income		1 70,788.
2	Total tax		2 7,831.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 13,909.
4	Amount you want refunded to you		4 6,078.
5	Amount you owe		5

Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Part II

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537**. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

7	9	5	0	9	
			gits, all ze		as

my

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

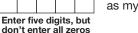
Your signature

Date 🕨

Spouse's PIN: check one box only

I authorize

to	enter	or	generate	mv	PIN
ιO	CITCI	UI.	yenerale	iiiy	1 11 1



ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's sig	gnature 🕨 🛛 Da	ate 🕨	•							
	Practitioner PIN Method Returns Only—continue	bel	ow							
Part III	Certification and Authentication – Practitioner PIN Method Only									
ERO's EFIN	I/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	2		6 nter a		2	7	1

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature >		Date 🕨	
	ERO Must Retain This F Don't Submit This Form to the I	 	
For Demonstral, Deduction As	Matter and the set of the set of the set of the set		Farm 9970 (Day, 01 0001)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

1040)	NR Department of the Treasury-Inter U.S. Nonresident Ali	nal Revenu en Inc	e Service	rn ^a	20 23	ОМВ	No. 15	45-0074	or stap	ole in this	
For the year Jan	. 1–	Dec. 31, 2023, or other tax year beginn	ing	, 2023	8, endi	ng		,	20		ee sepa Istructi	
Your first name	and	middle initial	Last nar	me						dentifyi	ng nun	
									(see in	structio	ns)	
PRIYA MAD			MEKAI						686	-17-9	509	
		ber and street). If you have a P.O. box	, see insti	ructions.							Apt.	no.
		RIDGE WAY									<u> </u>	
		office. If you have a foreign address, als	so comple	ete spaces below.				ate		ZIP co		
BALL GROU			Forsian	nyo, in a latata la untr			GZ			3010)'/	
Foreign country	nai		Foreign	province/state/county	/			reign p	oostal co	Jue		
Filing	_											
Status		Single 🛛 🗌 Married filing sepa			-	irviving spous			E	state		Trust
Check only	ŀ	you checked the QSS box, enter the o	child's nar	me if the qualifying per	rson is	s a child but n	ot you	ur depe	endent:			
one box.	-									-		
Digital Assets	At	any time during 2023, did you: (a) recei	ve (as a r	eward, award, or payn	nent f	or property or	servio	ces); oi	r (b) sell	exchar	nge, or	
	oth	erwise dispose of a digital asset (or a f	inancial ir	nterest in a digital asse	et)? (S	ee instruction	s.)	1				X No
Dependents				(2) Dependent's				(4) Che	eck the be			see inst.):
(see instructions):		(1) First name Last name		identifying number	(3)	Relationship to	you	Chil	d tax cre	dit C	Credit fo depend	
If more than four dependents, see												
instructions and												
check here												<u> </u>
Income	1a	Total amount from Form(s) W-2, box	•	,							·/8,	180.
Effectively	b	Household employee wages not rep								-		
	с С	Tip income not reported on line 1a (s						• •	. <u>10</u> . 10			
With U.S. Trade or	d e	Medicaid waiver payments not report Taxable dependent care benefits fro					•	• •	· 10			
Business	f	Employer-provided adoption benefit					•	•••	. 1			
Dusiness	g	Wages from Form 8919, line 6							. 19			
Attach	h	Other earned income (see instruction										
Form(s) W-2, 1042-S,	i	Reserved for future use										
SSA-1042-S,	j	Reserved for future use							. 1	i		
RRB-1042-S, and 8288-A	k	Total income exempt by a treaty fror	n Schedu	lle OI (Form 1040-NR),	item	L,						
here. Also		line 1(e)			• •	1k						1 0 0
attach Form(s)	z	Add lines 1a through 1h	1								/8,	180.
1099-R if	2a 3a	Tax-exempt interest 2a Qualified dividends 3a				interest v dividends .						
tax was withheld.	4a	IRA distributions 4a				amount						
lf you did not	5a	Pensions and annuities 5a				amount						
get a Form	6	Reserved for future use										
W-2, see instructions.	7	Capital gain or (loss). Attach Schedu	ile D (Forr	m 1040) if required. If r	not re	quired, check	here	[] 7			
	8	Additional income from Schedule 1	(Form 104	40), line 10					. 8		-7,	392.
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8	3. This is	your total effectively	conne	ected income			. 9		70,	788.
	10	Adjustments to income from Sched	•	rm 1040), line 26. Thes		•	-)		
	11	Subtract line 10 from line 9. This is y	our adju	sted gross income					. 1 '	I	70,	788.
	12	Itemized deductions (from Schedu deduction (see instructions)				Std Dedn US				2	13,	850.
	13a	Qualified business income deduction	n from Fo	rm 8995 or Form 8995	5-A .	13a					_	
	b	Exemptions for estates and trusts or										
	С	Add lines 13a and 13b										
	14											850.
	15	Subtract line 14 from line 11. If zero	or less, e	nter -U Inis is your ta	axabl	e income .	•		. 1			938.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

orm 1040-NR (2023)								Page 2
Fax and	16	Tax (see instructions). Check if any	/ from Fori	m(s): 1 🗌 88	314 2 497	2 3		16	7,831.
Credits	17	Amount from Schedule 2 (Form 1						17	0.
	18	Add lines 16 and 17						18	7,831.
	19	Child tax credit or credit for other	^r depende	nts from Sched	ule 8812 (Form 10	40)		19	
	20	Amount from Schedule 3 (Form 1	040), line	8			,	20	
	21	Add lines 19 and 20					,	21	
	22	Subtract line 21 from line 18. If ze	ero or less	, enter -0				22	7,831.
	23a	Tax on income not effectively cor				1 1			
		Schedule NEC (Form 1040-NR), li				23a			
	b	Other taxes, including self-emplo							
		line 21	•			23b			
	с	Transportation tax (see instructio				23c			
	d	Add lines 23a through 23c	,					23d	
	24	Add lines 22 and 23d. This is you							7,831.
ayments	25	Federal income tax withheld from							,,
i uyinonto	a	Form(s) W-2				25a 13	3,909	9	
	b	Form(s) 1099				25b	<i></i>		
	c	Other forms (see instructions)				25c			
	d	Add lines 25a through 25c						25d	13,909.
	e	Form(s) 8805							13,303.
		Form(s) 8288-A							
	f								
	g	Form(s) 1042-S							
	26	2023 estimated tax payments and		••				26	
	27	Reserved for future use				27			
	28	Additional child tax credit from S				28			
	29	Credit for amount paid with Form				29		_	
	30	Reserved for future use				30			
	31	Amount from Schedule 3 (Form 1	,.			31			
	32	Add lines 28, 29, and 31. These a							10.000
	33	Add lines 25d, 25e, 25f, 25g, 26,							13,909.
efund	34	If line 33 is more than line 24, sub				-			6,078.
	35a	Amount of line 34 you want refur							6,078.
ect deposit? e instructions.	b	Routing number 0 7 1 9				Checking	Saving	js	
	d	Account number 4 4 3 0							
	е	If you want your refund check ma	ailed to ar	address outsid	le the United State	es not shown on	page	1,	
		enter it here.				1			
	36	Amount of line 34 you want appli	ed to you	ir 2024 estimat	ed tax	36			
mount	37	Subtract line 33 from line 24. This		-					
ou Owe		For details on how to pay, go to	-	-			• •	37	
	38	Estimated tax penalty (see instrue				38			
hird	Do yo	u want to allow another person to	discuss th	nis return with th	ne IRS? See instru	ctions. 🗌 Ye	es. Cor	nplete be	low. 🛛 No
arty	Desig	nee's		Phone				ntification	
esignee	name						er (PIN)		
		penalties of perjury, I declare that I hav							
ian		they are true, correct, and complete. De	eciaration 0						, ,
ign							ent you an Identity		
ere								see inst.)	PIN, enter it here
	Dhari			Empileder -	STUDENT		(s	ee mst.)	
	Phone		Prenarar'	Email address s signature		Date	PTIN		Chaoleife
aid	•		•	0					Check if:
		PRIYA RAM SAGAR GUPTA TALLAM		lia kam sagaf	R GUPTA TALLAM	03/09/2024		82703	Self-employed
reparer		name GLOBAL TAXES I	J.C.				Phon	епо. (6	78)965-9522
reparer se Only		address 245 ROONEY C					Firm's		34-3171965

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Internal Revenue Service

Additional Income and Adjustments to Income

Attach to Form 1040, 1040-SR, or 1040-NR.

Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074 2023

Attachment Sequence No. **01**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number PRIYA MADHURI MEKATHOTI 686-17-9509

Par	t Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attac	ch Schedule E .	5	-7,392.
6	Farm income or (loss). Attach Schedule F.		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()	
b	5	8b		
С		8c		
d	····························	8d ()	
е		8e		
f		8f		
g		8g		
h		8h	_	
i		<u>8i</u>	_	
j		8j	_	
k		8k	_	
	Income from the rental of personal property if you engaged in the rental			
		81	_	
m	Olympic and Paralympic medals and USOC prize money (see			
	,	8m	-	
		8n	-	
0		80	-	
р		8p	-	
q		8q	-	
r		8r	-	
S	Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d	80 (
		8s (4	
t	Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan	8t		
		8u	-	
u 7	Wages earned while incarcerated	ou		
Z		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income . Enter	here and on Form		
	1040, 1040-SR, or 1040-NR, line 8	· · · · · · · ·	10	-7,392.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedu	ıle 1 (Form 1040) 2023

1	Educator expenses		 	11	
2	Certain business expenses of reservists, performing artists, and fee		nment		
-	officials. Attach Form 2106		 	12	
3	Health savings account deduction. Attach Form 8889		 	13	
4	Moving expenses for members of the Armed Forces. Attach Form 3903			14	
5	Deductible part of self-employment tax. Attach Schedule SE			15	
6	Self-employed SEP, SIMPLE, and qualified plans			16	
17	Self-employed health insurance deduction			17	
8	Penalty on early withdrawal of savings			18	
19a	Alimony paid			19a	
b	Recipient's SSN			Tou	
c	Date of original divorce or separation agreement (see instructions):	•			
20				20	
21	Student loan interest deduction			20	
22	Reserved for future use			22	
23	Archer MSA deduction			23	
24	Other adjustments:	· · ·	 • •	23	
<u>а</u>		24a			
a b	Deductible expenses related to income reported on line 81 from the	24a		-	
D		24b			
•	Nontaxable amount of the value of Olympic and Paralympic medals	240		-	
С	and USOC prize money reported on line 8m	24c			
А	Reforestation amortization and expenses	240 24d		-	
d	Repayment of supplemental unemployment benefits under the Trade	24u	 	-	
е		24e			
	Act of 1974	24e 24f		-	
f	Contributions to section 501(c)(18)(D) pension plans			-	
g	Contributions by certain chaplains to section 403(b) plans	24g		-	
h	Attorney fees and court costs for actions involving certain unlawful				
_	discrimination claims (see instructions)	24h		_	
i	Attorney fees and court costs you paid in connection with an award				
	from the IRS for information you provided that helped the IRS detect				
-	tax law violations	24i		_	
j	Housing deduction from Form 2555	24j		-	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
	1041)	24k			
z	Other adjustments. List type and amount:				
		24z			
25	Total other adjustments. Add lines 24a through 24z			25	
26	Add lines 11 through 23 and 25. These are your adjustments to income				
	Form 1040, 1040-SR, or 1040-NR, line 10	<u> </u>	 	26	

SCHEDULE NEC (Form 1040-NR)

Department of the Treasury

Internal Revenue Service

Tax on Income Not Effectively Connected With a U.S. Trade or Business

OMB No. 1545-0074

23

Attach to Form 1040-NR.

Go to www.irs.gov/Form1040NR for instructions and the latest information.

Name shown on Form 1040-NR

Attachment Sequence No. **7B**

2

PRIYA MADHURI MEKATHOTI

Your identifying number

686-17-9509

Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income			(a) 10%	(b) 15%	(c) 30%	(d) Other (specify)			
			(a) 10%	(b) 15%	(C) 30%	%	%		
1	Dividends and divide	nd equivalents:							
а	Dividends paid by U.	S. corporations	. 1a						
b	Dividends paid by for	paid by foreign corporations							
с	Dividend equivalent p	ayments received with respect to section 871(m) transaction	ns 1c						
2	Interest:								
а	Mortgage		. 2a						
b	Paid by foreign corpo	prations	. 2b						
с	Other		. 2c						
3	Industrial royalties (p	atents, trademarks, etc.)	. 3						
4	Motion picture or TV	copyright royalties	. 4						
5	Other royalties (copy	rights, recording, publishing, etc.)	. 5						
6	Real property income	and natural resources royalties	. 6						
7	Pensions and annuiti	es	. 7						
8		its							
9		Capital gain from line 18 below							
10	Gambling-Resident	s of Canada only. Enter net income in column (c). r - 0							
а	Winnings								
b	Losses		. 100						
11	Gambling-Resident	s of countries other than Canada.							
		s only. Losses aren't allowed							
12	Other (specify):								
		40:							
13	•	12 in columns (a) through (d)							
14		ate of tax at top of each column							
15	Tax on income not e	ffectively connected with a U.S. trade or business. Add co Capital Gains and Losse					-NR, line 23a 15		
			SFION			Ly			
Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not effectively connected with a U.S. business. Do not include a gain or loss on disposing of a U.S. real property interest; report these gains and losses on Schedule D		16 (a) Kind of property and description (if necessary, attach statement of descriptive details not shown below) (b) Date mm/de		(c) Date sold mm/dd/yyyy	(d) Sales price	(e) Cost or other basis	(f) LOSS If (e) is more than (d), subtract (d) from (e).	(g) GAIN If (d) is more than (e), subtract (e) from (d).	
(Form 1	•								
exchan	property sales or ges that are effectively								
connected with a U.S. business on Schedule D (Form 1040), Form 4797, or both.		17 Add columns (f) and (g) of line 16				17			
		18 Capital gain. Combine columns (f) and (g) of line	17. En	ter the net gain here	e and on line 9 abo	ove. If a loss, ente	r-0 18		

SCHE	DULE	5 OI
(Form	1040-	NR)

Other Information

OMB No. 1545-0074

Attach to Form 1040-NR.

Go to www.irs.gov/Form1040NR for instructions and the latest information.

Answer all questions.

	2023						
	Attachment Sequence No. 7C						
Your identifying number							

Department of the Treasury Internal Revenue Service				
Name shown on Form 1040	-NR			

For Pa	perwork Reduction Act Notice,	see the Instructions for For	rm 1040-NR. B	AA REV 03/04/24 PRO	Schedule OI (Form 104	0-NR) 2023			
2.	You have made an election in States as effectively connected					ne United			
•	with a U.S. trade or business u					•••			
	This is the first year you are m			rty located in the United	I States as effectively of	connected			
м	Check the applicable box if:		mation letter to your r						
3.	Are you claiming treaty benefit If "Yes," attach a copy of the 0				🗌 Yes	🗙 No			
	Were you subject to tax in a fo				Yes	∐ No ⊠ No			
_	(e) Total. Enter this amount o					—			
	(a) Cou	nury	(b) Tax treaty article	(c) Number of months claimed in prior tax year					
	amount of exempt income in th			1	(d) Amount of a	ompt			
1.					laimed the treaty benef	it, and the			
-	complete (1) through (3) below				and a course with a foroign				
L	If "Yes," did you use an alterna Income Exempt From Tax—If			•					
К	Did you receive total compens If "Yes," did you use an alterna					🛛 No			
•	U.S. person, or receive a contr					□ No			
-	If "Yes," did the trust have a l	J.S. or foreign owner unde	r the grantor trust rule	es, make a distribution	or loan to a				
J	If "Yes," give the latest year an Are you filing a return for a true	st?	104	UNK	Yes	🛛 No			
I	Did you file a U.S. income tax					🗌 No			
	Give number of days (including vacation, nonworkdays, and partial days) you were present in the United States during: 2021, 2022365, and 2023365								
н	Give number of days (including	vacation, nonworkdavs. and	l partial days) vou were	present in the United St	ates during:				
	Date entered United States mm/dd/yy	Date departed United State mm/dd/yy	es Da	te entered United States mm/dd/yy	Date departed Unite mm/dd/yy	ed States			
	check the box for Canada or								
	Note: If you're a resident of C	anada or Mexico AND con	nmute to work in the	United States at freque	nt intervals,				
G	List all dates you entered and			ns.					
F	Have you ever changed your w If you answered "Yes," indicat					🗙 No			
_	immigration status on the last o					N			
Е	If you had a visa on the last	day of the tax year, enter y	-		er your U.S.				
2.	A green card holder (lawful permanent resident) of the United States?								
		· · · · · · · · · · · ·				🔀 No 🔀 No			
D	Were you ever:				_	1			
c	Have you ever applied to be a green card holder (lawful permanent resident) of the United States?								
В	Of what country or countries were you a citizen or national during the tax year? <u>INDIA</u> In what country did you claim residence for tax purposes during the tax year? <u>India</u>								
A		vere vou a citizen or nationa	al during the tax year?						
PRTY	A MADHURI MEKATHOTI				686-17-9509				

SCHEDULE E		Supplemental Income and Loss							OMB No. 1545-0074				
(Form 1040)		(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)							2023		3		
						1040-SR, 1040-NR, or 1041.					Attachment		
Internal Revenue Service Go to www.irs.gov/ScheduleE for					instru	uctions an	d the la	test in	formation.		Sequence No. 13		
Name(s) shown on return Your soci								al security	/ numb	er			
_	A MADHURI									686-1	7-9509	9	
Part	Part I Income or Loss From Rental Real Estate and Royalties												
	Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm												
Α	rental income or loss from Form 4835 on page 2, line 40. A Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions												
													No
1a	Physical address of each property (street, city, state, ZIP code)												
A	H NO.1-12	-105/6	607SAI SAT	TYA RESIDENCY,A	LWAI	L TELAN	IGANA	IN 5	500010				
В													
С								1		1		-	
1b	Type of Prope			ntal real estate prope				-	ir Rental	Person			QJV
	(from list below	w)		ort the number of fair is be days. Check the Qu			_		Days	Da	-		
	3			the requirements to f			Α		310		0		<u> </u>
B				nt venture. See instru			В						<u> </u>
							С						
	of Property:		. /					_					
	Single Family R			tion/Short-Term Rent	tal	5 Land			Self-Rental				
2	Multi-Family Re	esidence	e 4 Com	mercial		6 Roya	alties	8	Other (desc	ribe)			
									Propert	ies:			
Incom	ne:						Α	В				С	
3	Rents received	b			3		5	540.					
4	Royalties rece	ived .			4								
Exper	ises:												
5	Advertising				5								
6	Auto and trave	el (see in	structions)		6								
7					7		6	80.					
8	Commissions				8								
9	Insurance .				9								
10	-				10								
11	-				11		1,0	52.					
12				c. (see instructions)	12								
13	Other interest	• •			13								
14					14								
15					15	2,966.							
16					16	1.100							
17					17		1,1	80.					
18		expense	or depletion		18								
19	Other (list)			40	19			2.0					
20	-		-	19	20		7,9	32.					
21				nd/or 4 (royalties). If									
				find out if you must	04		-7,39						
00				ter limitation, if any,	21 -7,39		52.	92.					
22				ter limitation, if any,	22	(-7,39			Ň	(
23a						(23a		540.	(
zsa b	I I I						•	23a		540.			
								230 23c					
d								230 23d					
e								23e		,932.			
24										. 24			
25	Income. Add positive amounts shown on line 21. Do not include any losses 24 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25						(7.	392.				
26				y income or (loss).							`	• •	
				40 on page 2 do no									

Schedule 1 (Form 1040), line 5. Otherwise	 nount in	ine 41 on page 2	· 26	-7,392.